

CREW: 97 WORK ORDER TYPE: ROUTINE

02-53663-53

ISSUE DATE 01/06/11

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Originator	: DAVID KENT	Schedule Date	: 12/06/05
Planner	: JEFFERY HOSTETTLER	Priority	: 3C
Drawing No	: 1BSB-M1040	Clearance	: NO
Equip No/Cat	: 1BSB--0 2	Tag Request	:
Project ID	:	Text ID	:
Shutdown	: N No Shutdown	Frequency	: NOT SCHEDULED
Ref No	:	Last Reading	: NO Reading

Date Completed: Failure Code:

Completed By : Signature :

Accepted By : Signature :

**** Delay Codes Legend ****

W=Whse C=CrSp T=Tag TL=Tool P=Plan

**** Record Time Daily ****

Delays

Step	Job Scope	MN	DY	Safety and Additional Information
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Emp No	Date	Hours	Code/Hrs
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1 PLEASE REMOVE THE SCAFFOLDING IN UNIT 1 2 1
SCRUBBER ELECTRICAL ROOM.

***** STAFF WALKDOWN *****

LOCATION: SECOND FLOOR IN SCRUBBER.

PLEASE CONTACT BRETT KENT AT #6447
WHEN THE SCAFFOLDING IS REMOVED.

ADDITIONAL INSTRUCTIONS BY SUPERVISOR

** IMPORTANT NOTICE **
 YOU ARE RESPONSIBLE FOR YOUR OWN SAFETY AND MUST
 ENSURE THAT THE REQUIRED PPE IS WORN FOR EVERY
 JOB YOU ARE DOING. IF YOU HAVE ANY QUESTIONS
 CONCERNING THE WORK RULES, SAFETY CODES, OR
 REQUIRED PPE, PLEASE CONTACT YOUR SUPERVISOR.

Job Feedback/Historical Notes:



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